

FACSIMILE COVER SHEET

RECEIVED
CENTRAL FAX CENTER

Licata & Tyrrell P.C.
66 E. Main Street
Marlton, New Jersey

JUN 28 2004

Tel: (856) 810-1515
Fax: (856) 810-1454

OFFICIAL

June 28, 2004

TO: Examiner (TC1600)**GROUP: 1646****FAX NUMBER: 703-872-9306****ATTORNEY DOCKET NO.: MCP-0082****SERIAL NO.: 10/042,696****FILED: October 3, 2001****NUMBER OF PAGES: 8**

MESSAGE: Attached please find Amendment Transmittal Letter, Reply to Restriction Requirement mailed May 26, 2004 and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

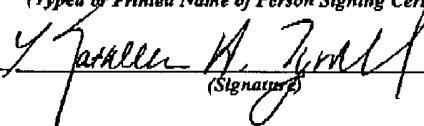
URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!

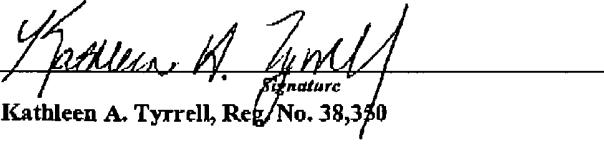
* * * * *

If you have any questions, or did not receive the proper number of pages, or had trouble during transmission, please call 856-810-1515.

CONFIDENTIALITY NOTICE

The information contained in this facsimile message is highly confidential and confidential, and is intended only for the use of the individual to whom it is addressed. If you are not the intended recipient, you are hereby warned that any unauthorized disclosure, copying, distribution, or taking of any action in reliance on the contents of this message or otherwise provided for herein by any individual other than the intended recipient shall constitute a violation of an attorney-client privilege. If you have received this transmission in error, please immediately notify us by telephone in order to arrange for the return of the message. Thank you.

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. MCP-0082
Applicant(s): Tuszyński et al.			
Application No. 10/042,696	Filing Date October 3, 2001	Examiner Not yet assigned	Group Art Unit 1646
Invention: Retroinverso Polypeptides That Mimic or Inhibit Thrombospondin			
OFFICIAL			
RECEIVED CENTRAL FAX CENTER JUN 28 2004			
<p>I hereby certify that this <u>Response to Restriction Requirement</u> <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u></p> <p>on <u>June 28, 2004</u> <small>(Date)</small></p>			
<u>Kathleen A. Tyrrell</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>  <small>(Signature)</small>			
<p>Note: Each paper must have its own certificate of mailing.</p>			

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. MCP-0082
Applicant(s): Tuszynski et al.					
Application No. 10/042,696	Filing Date October 3, 2001	Examiner Not yet assigned	Customer No. 26259	Group Art Unit 1646	Confirmation No. 3964
Invention: Retroinverso Polypeptides That Mimic or Inhibit Thrombospondin					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0	0 x \$9.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	0 x \$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Kathleen A. Tyrrell, Reg. No. 38,380					
Dated: June 28, 2004					
<div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. </div>					
<div style="border: 1px solid black; padding: 5px;"> <i>Signature of Person Mailing Correspondence</i> </div>					
<div style="border: 1px solid black; padding: 5px;"> <i>Typed or Printed Name of Person Mailing Correspondence</i> </div>					
CC:					

RECEIVED
CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUN 28 2004

Attorney Docket No.: MCP-0082

Inventors: Williams et al.

Serial No.: 10/042,696

Filing Date: October 3, 2001

Examiner: Liu, Samuel W.

Group Art Unit: 1653

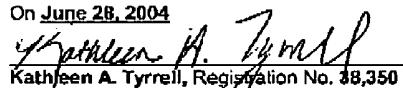
Title: Retroinverso Polypeptides that Mimic or
Inhibit Thrombospondin

OFFICIAL

Certificate of Facsimile Transmission

I hereby certify that this document is being facsimile
transmitted to the Patent and Trademark Office on
the date shown below.

On June 28, 2004


Kathleen A. Tyrrell, Registration No. 38,350Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Reply to Restriction Requirement

This is a reply to the Restriction Requirement mailed May 26, 2004 setting a one (1) month statutory period for response. Please enter the following amendments and remarks into the record.

Amendments to the specification begin at page 2.

Remarks begin at page 3.